

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
SERVICE PLANNING AREA 5**

**QUALITY IMPROVEMENT COMMITTEE
November 06, 2012**

AGENDA

- | | |
|--|----------------|
| I. Welcome and Introductions | Monika/Jessica |
| II. Review of Minutes | All |
| III. Program Announcements | All |
| • SA5 Agency Coordination Trouble Shooter | |
| IV. DMH Updates | Karen Williams |
| V. Quality Assurance | Monika/Jessica |
| • Link to QA website | |
| • Annual Review Protocol For Consolidated
Specialty Mental Health Services And Other
Funded Services, FY 2012-2013- State Department
Of Health Care Services Program Oversight and Compliance | |
| • California Code of Regulations,
Title 9. Rehabilitative and Developmental Services Division | |
| • Documentation Training Schedule | |
| • Policy No. 104.08 Clinical Records Maintenance,
Organization, and Contents | |
| VI. Quality Improvement | Monika/Jessica |
| • Quality Improvement Work Plan CY 2012 | |
| • SA5 Provider Directory Updates | |
| • Request to Change Provider Report, 1 st Quarter
Data for FY 2012-2013 – SA5 | |
| • Summary Report of Test Calls Study, Monitoring Accessibility
To the 24/7 Toll Free Access Line, November 5, 2012 | |
| • Test Calls Project, 2012 | |
| • Quality Improvement Work Plan Implementation Status Report,
Co-Occurring Disorders (Substance Use) (COD) | |

VII. Office of the Medical Director

Monika/Jessica

- The Pharmacy Connection, July 23, 2012

VIII. Next QIC Meeting

Monika/Jessica

The next Service Area 5 Quality Improvement Committee meeting will be held on Tuesday, January 08, 2013 from 9:00AM – 11:00AM, at 11303 West Washington Blvd., Suite 200, Los Angeles, CA 90066.

LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH **SA 5 Quality Improvement Committee**

Minutes

Type of Meeting	Quality Improvement Committee	Date	September 11, 2012
Place	DMH SA5 Administration, 11303 West Washington Blvd., Suite 200, Los Angeles, CA 90066	Start Time	9:00 AM
Chairperson	Monika Johnson; Co-Chair Jessica Wilkins	Adjournment	11:00AM
Members Present	Jessica Wilkins, Alcott Center; Karen Williams, DMH; Monika Johnson, DMH; Timothy Beyer, DMH; Mary Crosby, DMH; Audra Casabella, DMH; Nilisa Gallardo, Edelman - Adult; Patrice Grant, Edelman – Child; Eloisa Ramos Robles, Exceptional Children's Foundation; Kathy Shoemaker, Exodus Recovery; LeeAnn Skorohod, Exodus Recovery; Philip Guaglianone, Homes For Life Foundation; Susan Strom, OPCC; Martha Andreani, St. John's CFDC; Brooke Mathews, St. Joseph Center; Ely Baidoo, Step Up on Second; Kim Farnham, The Help Group; Melissa Fernandez, The Help Group; Audra Langley, UCLA Ties for Adoption; Keith Miller, WCIL; Elaine Rosa, WISE & Healthy Aging.		
Excused Members	Kristi Rangel, Alcott Center; Bonnie McRae, Edelman – Child; Linnea Shapiro Fuchs, Exceptional Children's Foundation; Lipton Ellner, Homes For Life Foundation; Anahita Saadatfard, Homes for Life Foundation; Sharon Greene, St. John's CFDC; Nick Malorino, St. Joseph's Center; Dorothy Berndt, St. Joseph Center; Julie Connella, St. Joseph Center; Barbara Bloom, Step Up on Second; Brenda Pitchford, UCLA Ties for Adoption; Paisha Allmendinger, UCLA Ties for Adoption; Susan Edelstein, UCLA Ties for Adoption; Cheryl Carrington, Vista Del Mar; Jennifer Levine, WISE & Healthy Aging.		
Absent Members	Rebecca Roberts, Didi Hirsch; Thang Nguyen, DMH; David Kneip, Exodus Recovery; Michi Okano, Pacific Asian Counseling Services; Stephanie Yamada, Pacific Asian Counseling Services; Yvette Willock, Pacific Clinics.		
Agenda Item & Presenter	Findings and Discussion	Decisions/ and Recommendations/ Scheduled Actions/ Task	Person Responsible/Due Date
Call to Order & Introductions	The meeting was called to order at 9:00 a.m.	Introductions were made	Monika Johnson QIC Membership

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Review of Minutes and Handouts	Minutes were reviewed and approved for July, 2012.	Final approved Minutes for May, 2012 were distributed.	QIC Membership
DMH Updates	<p>The Trouble Shooter Roster was updated.</p> <ul style="list-style-type: none">• DMH Budget <p>Regarding the DMH Budget for FY 2012/13, Karen informed the membership that at this time there are no significant budget issues to report.</p> <ul style="list-style-type: none">• MHSA Outcomes and Performance Review <p>Karen informed members that Senate President Darrell Steinberg received approval from the Joint Legislative Audit Committee for an outcomes and performance review of the MHSA. She further reported that LA County will be among the counties that will be reviewed but neither the time nor the focus of the review have yet been established. At this time it is expected that there will be some review of the stake holder process. The review may also include various clinical programs with a particular interest in outcomes.</p>	Copies of the OMA Newsletter, August 2012 were distributed.	<p>Monika Johnson</p> <p>Karen Williams</p>

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DMH Updates	<p>Karen stated that DMH entered into an agreement with the RAND Corporation to conduct Service Area Data Workgroups. Among other objectives, these groups will be using outcome data to guide planning and decision making.</p> <p>Question: Is anyone interested to analyze data at the agency level relative to PEI programs?</p> <p>Question: Does anyone use OMA data now for program planning and decision-making purposes?</p> <p>Answer: Yes, through the SIFT data. We track but can't predict which EBP is being used most frequently and which is most beneficial.</p> <p>Providers engaged in a brief discussion about their interest in participating in such workgroups and regarding the focus of these groups.</p>	<p>Karen suggested that those interested in participating in a workgroup should sign up at the end of the meeting. She also encouraged QA staff to report back to their Executive Providers who may assign additional staff.</p> <p>Karen stated once the focus of the groups is clear, she would like to invite Debby Innes-Gomberg, District Chief for MHSA Implementation for further discussion.</p>	

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Quality Improvement	<ul style="list-style-type: none"> • Consumer Perception Survey, August 2012 Monika and Tim Beyer thanked Providers for their participation and the timely submission of the surveys. Tim reported that the surveys have been scanned but data is not yet available. • Access Center Project 2012 Monika and Tim Beyer thanked the Providers for their strong participation in the Access Center Project. Monika reported that instead of the 10 required calls, SA 5 Providers placed 17 calls of which OPCC staff alone placed 9 calls. Tim congratulated Providers for this achievement and stated that their participation was highly appreciated. • Request To Change Provider Report, 4th Quarter Data for FY 2011-2012 For SA 5 Monika and Jessica asked Providers to review the data and fax outstanding reports to Ted Wilson. 	<p>Tim Beyer will provide outcome data once it becomes available.</p> <p>Tim Beyer will provide Access Center outcome data once it becomes available.</p> <p>Copies of the Request to Change Provider Report for SAs were distributed.</p> <p>Providers agreed to verify the accurateness of the contact information and then follow up with the Patient Rights' Office.</p>	<p>Tim Beyer</p> <p>Tim Beyer</p> <p>Providers</p>

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Quality Improvement	<ul style="list-style-type: none"> Service Area Provider Directory Monika reported that the SA Provider Directory will be updated on an annual basis. She asked Providers to review their agency's information as it is posted on the website, and to e-mail necessary changes to Darlesh Horn and to Monika Johnson. This is to assure that any updated information in the Provider Directory will also be cleared by the Financial Analyst. State DHCS Protocol Training Monika and Jessica reported that in the last QIC Chairs Meeting the following information was provided: <ul style="list-style-type: none"> The System Review is scheduled for February 11, 2013 In addition to Call Logs and evidence of NOAs, copies of sign-in sheets for group attendance will need to be submitted. The latter is a new requirement. <ul style="list-style-type: none"> The Chart Review is scheduled for February 25, 2013 and March 4, 2013 A total of 40 adult and 40 children charts will be randomly selected and reviewed. Electronic charts need to be printed out. 	<p>Darlesh's and Monika's e-mail addresses were provided.</p> <p>Providers agreed to e-mail necessary changes as directed.</p> <p>Copies of the Review Schedule for FY 2012/13, and copies of the handout "Reasons for Recoupment" were provided.</p>	Providers

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Quality Improvement	<p>Jessica and Monika distributed the handout "Reason for Recoupment #19" to highlight important areas that are being reviewed and to reinforce the importance of QA at each provider agency.</p> <p>Monika and Jessica also referred to the QI Work Plan CY 2012, and Tim Beyer assisted the Providers to review and discuss all six categories: monitoring service delivery capacity, accessibility of services, beneficiary satisfaction, clinical care, continuity of care, and monitoring provider appeals.</p> <p>Jessica and Monika referred to the DMH Policy No. 112.05 and reminded Providers of their responsibility to screen the entire staff against the federal and state lists every month.</p> <p>Question: How can I access this list and the Policy?</p>	<p>A copy of the Quality Improvement Work Plan CY 2012 was provided. A hardcopy of the QI Evaluation Report 2011 was also available for review.</p> <p>Jessica and Monika asked Providers to further review and consider these 6 system issues, as well as any other QI issues to work on in the next SA QIC. The information will then be given to Martie Drinan, District Chief, QI Division.</p> <p>Monika and Jessica referred Providers to the DMH website for Policy No. 112.05</p>	<p>Providers</p> <p>Providers</p> <p>Providers</p>

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<p>Quality Improvement</p> <p>Office of the Medical Director</p>	<ul style="list-style-type: none"> • Cultural Competency <p>Monika and Jessica informed Providers that the QI Division is reviewing the current IS data categories of race and ethnicity and is planning to break them out to be more specific. The purpose is to accurately identify consumer's needs, remove barriers to service delivery, improve accessibility of services, and increase beneficiary satisfaction.</p>	<p>Attachment 2 contains the websites for the various sanction lists which are provided as hyperlinks.</p> <p>A copy of the Psychiatrist Peer Review form was distributed.</p>	<p>Providers</p>

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Quality Assurance	<ul style="list-style-type: none">WIC 14707.5 – Intent of the Legislature to develop a performance outcome system for EPSDT mental health service <p>Monika and Jessica referred to the handout and informed providers that the Department is in the process of convening a stakeholder advisory committee for the purpose of creating a plan for a performance outcome system for EPSDT mental health services.</p> <ul style="list-style-type: none">QA Bulletin, August 9, 2012, No. 12-04, Updates To The "Guide to Procedure Codes" <p>Jessica and Monika briefly reviewed the handout, highlighting some of the more significant changes.</p> <ul style="list-style-type: none">QA Bulletin, September 10, 2012, No. 12-05, New Quality Assurance Division Leads <p>Monika and Jessica reviewed with Providers the handout and announced that the SA5 QA Division Lead, Susan Cozolino will be attending all or most SA5 QICs, starting in November.</p>	<p>A copy of the WIC 14707.5 handout was distributed.</p> <p>A copy of the QA Bulletin 12-04 was distributed.</p> <p>A copy of the QA Bulletin 12-05 was distributed.</p>	<p>Providers</p> <p>Providers</p>

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Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Quality Assurance	<ul style="list-style-type: none"> • QA Bulletin, September 10, 2012, No. 12-06, Documentation Changes Based On The New State Contract with the Providers. Jessica reviewed the Bulletin with the Providers. Jessica referred to the Bulletin, highlighting that it says that Providers need to implement these changes immediately in order to remain in compliance with the State Contract. As pointed out in the Bulletin, the changes refer to the CCCP that now must have a proposed frequency and duration of interventions, and to the progress notes that now need to have the rendering provider's signature, their type of professional degree, licensure or job title, and their relevant identification number, if applicable. • QA Bulletin, September 10, 2012, No. 12-07, New Guide to Quality Assurance Chart Review Requirements – For Directly Operated Programs <p>Monika and Jessica informed Providers that this Bulletin has been issued only to directly operated programs regarding QA Chart Reviews, the Chart Review Tool and the Quarterly Monitoring Report. They referred</p>	<p>A copy of the QA Bulletin 12-06 was distributed.</p> <p>A copy of the QA Bulletin 12-07 was distributed.</p>	<p>Providers</p> <p>Providers</p>

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	<p>to Page 2 of the QA Bulletin that states that "contract agencies are expected to have a QA Process for reviewing clinical records in place" and that they "may use the QA Division's tools but must take full ownership and responsibility for the use of them".</p> <ul style="list-style-type: none"> Clinical Records Bulletin, Edition 2012-01, August 15, 2012, MH 708, Consent for Email, MH 706, Patient Instructions, MH 707, Tier 2 Clinical Transfer (For HWLA and DMH-DHS Co-located Programs) <p>Monika and Jessica referred to the Records Bulletin and highlighted major points.</p> <ul style="list-style-type: none"> A Guide to Claiming Prevention and Early Intervention (PEI) & Evidence-Based Practice (EBP) Services, July 13, 2012 <p>Monika reported that the updated PEI Claiming Guidelines have been posted on the DMH website.</p>	<p>A copy of the Clinical Records Bulletin 2012-01 and a copy of Policy No. 500.49, Appropriate Use of Email For Transmitting PHI And/Or Confidential Data, was distributed.</p> <p>A copy of the PEI Claiming Guidelines was distributed.</p>	<p>Providers</p> <p>Providers</p>

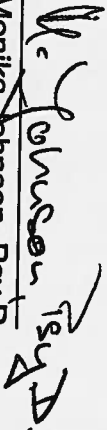
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<p>Next Meeting</p>	<ul style="list-style-type: none"> LA County DMH Abbreviations for the Clinical Record, Draft August 13, 2012 <p>Jessica and Monika referred to the handout and encouraged Providers to only use the DMH abbreviations in their clinical records.</p> <p>The next Service Area 5 Quality Improvement Committee meeting will be held on Tuesday, November 06, 2013 at DMH – West LA SAs Administrative Offices, 11303 W. Washington Blvd., Suite 200 in Los Angeles from 9:00AM – 11:00AM.</p>	<p>A copy of the DMH Abbreviations for the Clinical Record was distributed.</p> <p>N/A</p>	<p>Providers</p> <p>N/A</p>

Respectfully Submitted,


 Monika Johnson, Psy.D.


 Jessica Wilkins, MFT

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